9/25/25, 9:06 AM



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(((H25000343909 3)))



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To:

Division of Corporations

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From:

Account Name : FRANK, WEINBERG, BLACK, P.L.

Account Number : I2004000083 Phone

: (954)474-8000

Fax Number

: (954)474-9850

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COR AMND/RESTATE/CORRECT OR O/D RESIGN 5900 COLLINS AVENUE CONDOMINIUM ASSOCIATION, INC.

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September 26, 2025

FLORIDA DEPARTMENT OF STATE

5900 COLLINS AVENUE CONDOMINIUM ASSOCIATION, INC. 5900 COLLINS AVE MANAGEMENT OFFICE MIAMI BEACH, FL 33140US

SUBJECT: 5900 COLLINS AVENUE CONDOMINIUM ASSOCIATION, INC.

REF: N98000004032

We have received your document for 5900 COLLINS AVENUE CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

You can list or have two Registered Agents. Please choose between Michael R. Kassower & C/O FRANK WEINBERG & BLACK, PL.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Morgan E Lovett FAX Aud. #: H25000343909 Regulatory Specialist II Letter Number: 925A00021796 Articles of Amendment

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to
Articles of Incorporation
of

		0,				
5900 COLLINS AVENT	UE CONDO	MINTUM ASS	SOCIATION, INC.			
(Name of Cornoration as currently filed with the	e Florida D	ept, of State)				
	N98000	004032				
(Досил	nent Numbe	r of Corporation	on (if known)		······	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statute:	s, this <i>Florida</i>	Nat For Profit Cor	poration adopts t	he folio	wing
A. If amending name, enter the new name of the	e cornorati	<u>en:</u>				
					The	ያያ መጣሪያ
name must be distinguishable and contain the word "Company" or "Ca." may not be used in the name		on" or "incorp	norated" or the abb	reviation "Corp.		
B. Enter new principal office address, if applica						
(Principal office address <u>MUST BE A STREET A</u>	<u>DDKESS</u>)		_		- (-)	202
					2	
	-				= "	
C. Enter new mailing address, if applicable:					;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	ب
(Mailing address MAY BEA POST OFFICE	HUX)				*1,	<u> </u>
	-				17	An e
					ਹ ੋ :	Ę
					3177	一;
D. If amending the registered agent and/or registered agent and/or the new registered.			lorida, enter the na	ime of the		
		. Kassower				
Nume of New Registered Agent:				· · · · · · · · · · · · · · · · · · ·		
	7805 SW 6	oth Court		erg & Black, P.L.		
New Registered Office Address:			(Florida street add	(MER)		
	Plantation			33324	ļ	
		(City)		, Florida (Zip Code)		—
				(Lip Cour)		
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen	<u>legistered /</u>	Vent:	accent the obligation	ne of the notition		
incress accept the appointment as registered agen	المالية المالية		accept the obligation	ng oj me posmon	•	
Ĺ						
_	Sig	nature of New	Registered Agent, i	changing		_

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If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X.Change X.Remove X.Add	PI Y SY	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change Add			
Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add	·		
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee	ig additio	onal Articles, enter change(s) here: essary). (Be specific)	
		H25000343909 3	

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	<u> </u>	
		
		
The date of each amendment(s) adoption: date this document was signed.		, if other than the
Effective date if applicable:	no more than 90 days after amendment file date)	<u>-</u>
	not meet the applicable statutory filing requirements, this date will not be	c listed as the
Adaption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted b was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	

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There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.						
Deted 9/24 /2025						
Signature (Byfine chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_					
ROBERT J. HETZLER						
(Typed or printed name of person signing)						
President						
(Title of person signing)						